

## MEMORANDUM

Agenda Item No. 11(A)(31)

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**TO:** Honorable Chairman Joe A. Martinez  
and Members, Board of County Commissioners

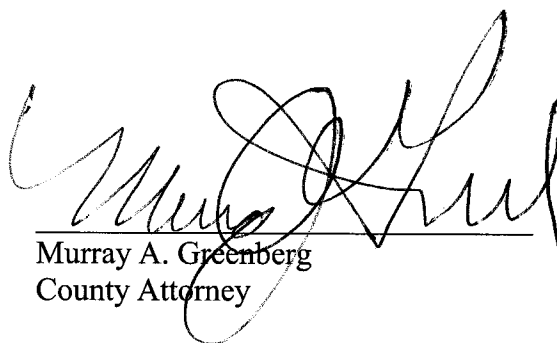
**DATE:** May 9, 2006

**FROM:** Murray A. Greenberg  
County Attorney

**SUBJECT:** Resolution retroactively  
authorizing in-kind services  
for the March 31, 2006 Relay  
for Life sponsored by the  
American Cancer Society

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The accompanying resolution was prepared and placed on the agenda at the request of  
Commissioner Katy Sorenson.



Murray A. Greenberg  
County Attorney

MAG/jls



# MEMORANDUM

(Revised)

**TO:** Honorable Chairman Joe A. Martinez  
and Members, Board of County Commissioners

**DATE:** May 9, 2006

**FROM:** Murray A. Greenberg  
County Attorney

**SUBJECT:** Agenda Item No. 11(A)(31)

Please note any items checked.

\_\_\_\_\_ "4-Day Rule" ("3-Day Rule" for committees) applicable if raised

\_\_\_\_\_ 6 weeks required between first reading and public hearing

\_\_\_\_\_ 4 weeks notification to municipal officials required prior to public hearing

\_\_\_\_\_ Decreases revenues or increases expenditures without balancing budget

\_\_\_\_\_ Budget required

\_\_\_\_\_ Statement of fiscal impact required

\_\_\_\_\_ Bid waiver requiring County Manager's written recommendation

\_\_\_\_\_ Ordinance creating a new board requires detailed County Manager's report for public hearing

\_\_\_\_\_ Housekeeping item (no policy decision required)

\_\_\_\_\_ No committee review

Approved \_\_\_\_\_ Mayor

Agenda Item No. 11(A)(31)

Veto \_\_\_\_\_

05-09-06

Override \_\_\_\_\_

RESOLUTION NO. \_\_\_\_\_

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARK AND RECREATION DEPARTMENT FOR THE MARCH 31, 2006 RELAY FOR LIFE SPONSORED BY THE AMERICAN CANCER SOCIETY, A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED \$3,566.00 TO BE FUNDED FROM THE DISTRICT 8 IN-KIND RESERVE FUND

**WHEREAS**, the American Cancer Society has requested in-kind services from the Miami-Dade Park and Recreation Department for the March 31, 2006 Relay for Life in an amount not to exceed \$3,566.00 (see attached Fee Waiver/In-Kind Service Application); and

**WHEREAS**, the American Cancer Society is a not-for-profit organization; and

**WHEREAS**, the Relay for Life is a district event, and the in-kind services shall be funded from the District 8 In-kind Reserve Fund,

**NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA**, that this Board retroactively authorizes in-kind services from the Miami-Dade Park and Recreation Department for the March 31, 2006 Relay for Life in an amount not to exceed \$3,566.00 to be funded from the District 8 In-kind Reserve Fund.

The foregoing resolution was sponsored by Commissioner Katy Sorenson and offered by Commissioner \_\_\_\_\_, who moved its adoption. The motion was seconded by Commissioner \_\_\_\_\_ and upon being put to a vote, the vote was as follows:

Joe A. Martinez, Chairman  
Dennis C. Moss, Vice-Chairman

Bruno A. Barreiro  
Audrey M. Edmonson  
Sally A. Heyman  
Dorrin D. Rolle  
Katy Sorenson  
Sen. Javier D. Souto

Jose "Pepe" Diaz  
Carlos A. Gimenez  
Barbara J. Jordan  
Natacha Seijas  
Rebeca Sosa

The Chairperson thereupon declared the resolution duly passed and adopted this 9th day of May, 2006. This resolution shall become effective ten (10) days after the date of its adoption unless vetoed by the Mayor, and if vetoed, shall become effective only upon an override by this Board.

MIAMI-DADE COUNTY, FLORIDA  
BY ITS BOARD OF  
COUNTY COMMISSIONERS

HARVEY RUVIN, CLERK

By: \_\_\_\_\_  
Deputy Clerk

Approved by County Attorney as  
to form and legal sufficiency.

DDC

Diamela del Castillo

**MIAMI-DADE COUNTY  
FEE WAIVER/IN-KIND SERVICES APPLICATION**

Parks: \$3566

COUNTY FEE WAIVERS OR IN-KIND SERVICES REQUESTED THROUGH THIS PROCESS ARE NOT EFFECTIVE UNTIL APPROVED BY ACTION OF THE BOARD OF COUNTY COMMISSIONERS PURSUANT TO THE MIAMI-DADE COUNTY HOME RULE CHARTER

Please complete the following form and submit completed form along with requested materials, if applicable to:

Special Events Staff  
Communications Department  
111 N.W. 1<sup>st</sup> Street, Suite 2510  
Miami, FL 33128

Phone: (305) 375-2836  
Fax: (305) 375-3968

Type of Event/Application (select one of the following):

- ☐ District Event - Event of minimal impact related to specific commission district (Complete questions 1-7, sign and date; copy will be submitted to the appropriate District Commissioner within two days of receipt of application.)
- ☐ Small Event - Event of minimal impact not necessarily related to a specific commission district. (Complete questions 1-7, sign and date.)
- ☒ Special Event - Event with expected attendance of less than 5,000 with localized impact limited to an individual community or municipality (Complete questions 1-12, sign, date and submit form no later than 30 days prior to event date.)
- ☐ Major Event - Large Event with expected attendance of over 5,000 or significant probability of protests, controversy, violence or vandalism (Complete questions 1-12, sign, date and submit form no later than 120 days prior to event date.)

1. Full legal name of the requesting organization: AMERICAN CANCER SOCIETY

2. Applicant Status: (Select one of the choices below)

- ☒ Not-For-Profit or Tax Exempt ☐ Local Government or Public Entity
- ☐ For-Profit
- ☐ County Sponsored Event/Sponsoring Department
- ☐ Other (specify): \_\_\_\_\_

3. Name and contact information for single point of contact (address, phone, fax, e-mail address, etc.): MISTI ALDER, 3901 NW 7<sup>th</sup> AVE., STE. 224 MIAMI, FL 33146 phone: 305.779.2844 fax: 305.592.5140  
e-mail: misti.alder@acancer.org

4. Specify fee waiver or in-kind service requested (quantify, if applicable): large (new) showmobile \$3,566

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries): RELAY FOR LIFE OF CUTLER RIDGE 31MAR-01APR06, an over-night team event to raise money for the ACS mission and celebrate survivors. Beneficiaries of the money are anyone interested in knowing more about cancer, treatments, etc. by calling 1.800. CS. 2345 or visiting www.cancer.org; cancer patients and their families (Hope Lodge stays, Look Good Feel Better Programs, R.O.C.K. Camp for Kids and R.O.C.K. Family Weekend); cancer survivors (R.O.C.K. Scholarship); researchers.

6. Please select ALL that apply to event:

- ☐ Economic Development: Event supports vitality or growth of the local economy
- ☐ Youth/Education: Event benefits youth of any age and/or offers educational benefits
- ☒ Health and Social Services: Event supports health-related causes and/or social programs or institutions that improve quality of life within the community
- ☐ Arts and Culture: Event supports music, theatre, literature, art or culture
- ☐ Environmental: Event benefits environmental concerns or promotes conservation
- ☐ Sports and Athletics: Event supports/promotes organized sports or recreational participation

7. Physical address of event venues (please specify Commission District(s)): CUTLER RIDGE PARK; 10100 SW 200<sup>th</sup> ST.

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MIAMI-DADE COUNTY  
FEE WAIVER/IN-KIND SERVICES APPLICATION

8. Description of regional or local impact: Brings community together for a cause that affects/touches everyone: cancer. Goal for Miami-Dade county is to raise \$1,103,000. This particular event is goal of \$47,000
9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable): The event is scheduled from 9am - noon the following day. Delivery of the showmobile should be by 4pm. + pick-up car be completed at noon. (101APR06)
10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): The staff at the Park will assist with locating the showmobile; I have also attached a tentative map for your reference.
11. Expected number of participants and estimated attendance (per day, if applicable): 500-700
12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): See attached budget. Expenses may not exceed \$4,710 as per our event standards.

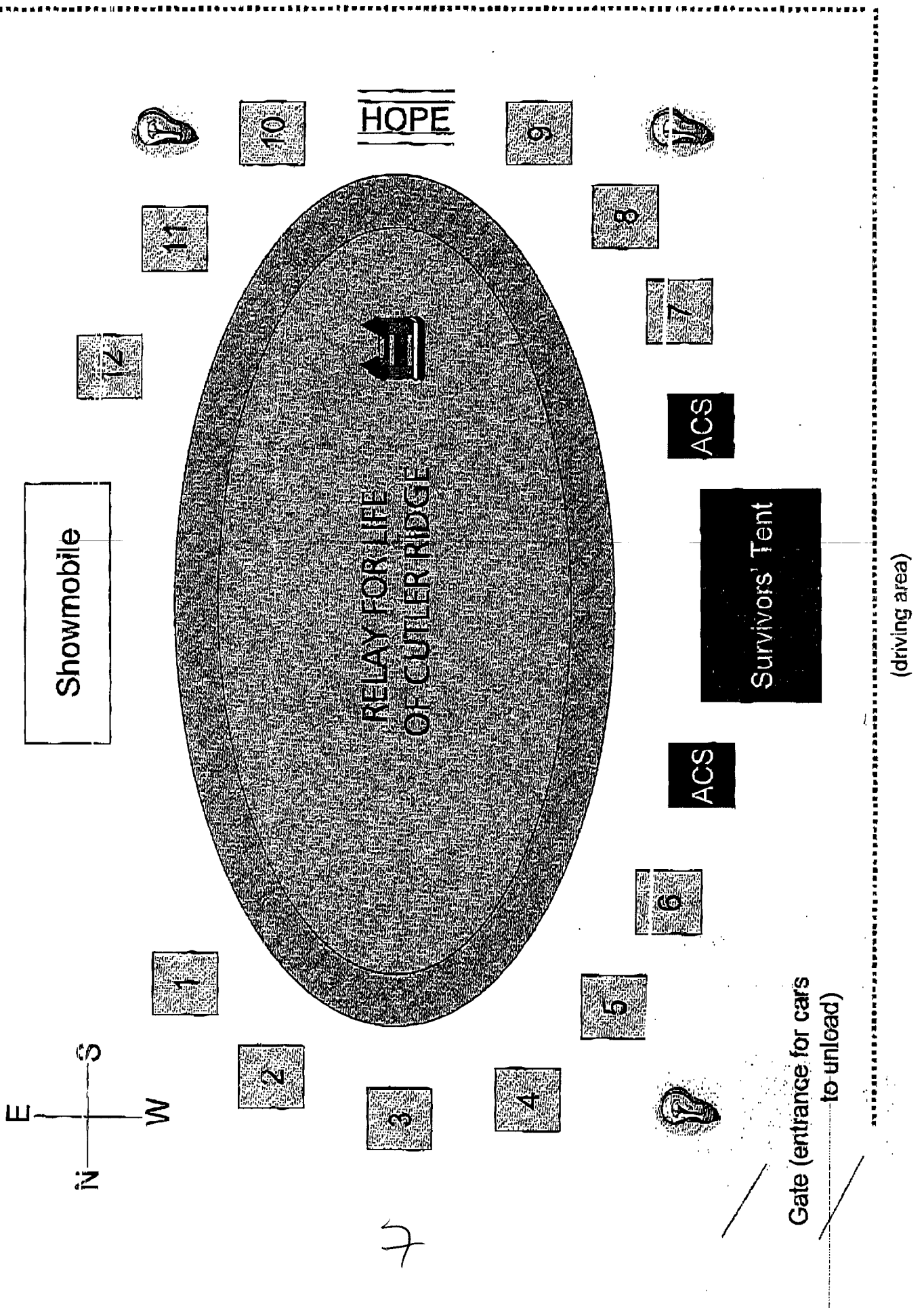
I hereby certify that all the statements made in this application are true and correct.

Maria Nolas

Signature of Authorized Representative

10 MAR 06

Date









1694 \$ Raised in Luminaria Income 2004/05

\$10,000	Total \$'s	\$10,000	\$10,000
\$5,000	Total \$'s	\$0	\$0
\$2,000	Total \$'s	\$1,000	\$2,000
\$1,000	Total \$'s	\$0	\$3,000

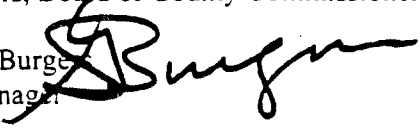
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# Memorandum



**Date:** May 9, 2006

**To:** Honorable Chairman Joe A. Martinez  
and Members, Board of County Commissioners

**From:** George M. Burge  
County Manager 

**Subject:** District Specific In-Kind Request Recommendation

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The Office of Strategic Business Management (OSBM) has reviewed the attached in-kind request and recommends for the item to move forward to the Board of County Commissioners for consideration. The district specific in-kind reserve balance allows for the funding of this request.

## Background

A waiver for in-kind services is being requested by a not-for-profit organization American Cancer Society for their annual Relay for Life in Cutler Ridge Park scheduled for March 31, 2006.

In-kind services have been requested in an amount not to exceed \$3,566 from the Park and Recreation Department for use of the large show mobile. This event will be funded from the District 8 district specific in-kind reserve.

In FY 2005-06 the American Cancer Society has received a total of \$17,602.00 in in-kind services for Relay for Life events throughout the Miami-Dade County. The District 11 district specific in-kind reserve sponsored \$5,351 for the Kendall event and District 10 sponsored from the countywide in-kind reserve \$12,251.00 for the Tropical Park event.

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